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POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	80	10-10-27
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY
INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS

- Rejected
- + Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Final	Original	Date
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POSITION	ID NO.	DATE
CLASSIFIER	68	5-7-94
EXAMINER	207	5-7-94
TYPIST	326	7-17-94
VERIFIER	357/7-20-357	6-21-94
CORPS CORR.		
SPEC. HAND	100 437	7-11-94
FILE MAINT.	434	5-9
DRAFTING		

BEST AVAILABLE

INDEX OF CLAIMS

Claim	Final	Original	Date
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